

Department of Homeland Security U. S. Coast Guard CG PSC-7210 (6/03)	DESIGNATION AS PAYMENT APPROVING OFFICIAL (PAO)
Section 1 -- Member Information	
Name: _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 15%;"> Last First MI </div>	
Grade: _____ SSN: _____ Employee ID: _____	
Official Duty Station: _____ DD-OFPAC-RU: _____ SDA-II User ID: _____ CGHRMS User ID: _____	
Statement of Responsibility and Liability: PERSRU officials (PAO) having access to the review and approval module in SDA-II and/or the CGHRS role is CGHRMS shall become knowledgeable in the matters of the document being signed. The PAO shall ensure documents are properly and carefully audited before certification and not signed as just a matter of formality. The PAO shall not compromise system integrity by revealing personal passwords. The PAO is fully accountable to the Coast Guard and may be found liable for erroneous or improper payments until properly relieved of accountability. Personal monetary liability, adverse personal evaluation, and or further administrative or disciplinary actions may result if found negligent in the performance of PAO duties.	
Member Signature: _____	
Section 2 -- Command Designation The member above is designated as a PAO for the listed PERSRU. By his/her signature in Section 1, they certify agreement to the statements made under responsibilities and liability. Commanding Officer (or designee) Signature: _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 15%;"> Last, First, MI Rank Title Telephone No. </div>	
Section 3 -- PSC Validation/Designation Above information reviewed by: _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 15%;"> Last, First, MI Rank Title Telephone No. </div> Approved: _____ Disapproved: _____ Signature: _____	
Section 4 -- Termination/PSC notification PAO duties are automatically terminated with a permanent transfer out of the PERSRU, including any inter-unit transfer, or when terminated by other competent authority. Above member's PAO authorizations are terminated Effective Date: _____ Reason: _____ (PCS, UCMJ, etc.) Commanding Officer (or designee) Signature _____ <div style="display: flex; justify-content: flex-end; width: 80%; margin-right: 15%;"> Last, First, MI Rank, Title </div> Send copy of termination to PSC (MAS)	

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